

HOUSE AMENDMENT NO. ____
TO
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Offered By

AMEND House Amendment No. ____ to House Committee Substitute for Senate Substitute for Senate Bill No. 64, Page 4, Line 11, by inserting after the word "elsewhere" the following:

" , provided, no funds shall be expended to any abortion facility, as defined in section 188.015, or any affiliate or associate thereof"; and

Further amend said amendment and page, Line 34, by inserting after the word "term" the following:

" , provided, no funds shall be expended to any abortion facility, as defined in section 188.015, or any affiliate or associate thereof"; and

Further amend said amendment, Page 9, Line 42, by deleting all of said line, and inserting in lieu thereof the following:

"coding system. Providers eligible for such reimbursement shall include psychologists.

208.153. 1. Pursuant to and not inconsistent with the provisions of sections 208.151 and 208.152, the MO HealthNet division shall by rule and regulation define the reasonable costs, manner, extent, quantity, quality, charges and fees of MO HealthNet benefits herein provided. The benefits available under these sections shall not replace those provided under other federal or state law or under other contractual or legal entitlements of the persons receiving them, and all persons shall be required to apply for and utilize all benefits available to them and to pursue all causes of action to which they are entitled. Any person entitled to MO HealthNet benefits may obtain it from any provider of services with which an agreement is in effect under this section and which undertakes to provide the services, as authorized by the MO HealthNet division, provided, said provider shall not include any abortion facility, as defined in section 188.015, or any affiliate or associate thereof. At the discretion of the director of the MO HealthNet division and with the approval of the governor, the MO HealthNet division is authorized to provide medical benefits for participants receiving public assistance by expending funds for the payment of federal medical insurance premiums, coinsurance and deductibles pursuant to the provisions of Title XVIII B and XIX, Public Law 89-97, 1965 amendments to the federal Social Security Act (42 U.S.C. 301, et seq.), as amended.

2. MO HealthNet shall include benefit payments on behalf of qualified Medicare beneficiaries as defined in 42 U.S.C. Section 1396d(p). The family support division shall by rule and regulation establish which qualified Medicare beneficiaries are eligible. The MO HealthNet

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1 division shall define the premiums, deductible and coinsurance provided for in 42 U.S.C. Section
2 1396d(p) to be provided on behalf of the qualified Medicare beneficiaries.

3 3. MO HealthNet shall include benefit payments for Medicare Part A cost sharing as defined
4 in clause (p)(3)(A)(i) of 42 U.S.C. 1396d on behalf of qualified disabled and working individuals as
5 defined in subsection (s) of Section 42 U.S.C. 1396d as required by subsection (d) of Section 6408
6 of P.L. 101-239 (Omnibus Budget Reconciliation Act of 1989). The MO HealthNet division may
7 impose a premium for such benefit payments as authorized by paragraph (d)(3) of Section 6408 of
8 P.L. 101-239.

9 4. MO HealthNet shall include benefit payments for Medicare Part B cost sharing described
10 in 42 U.S.C. Section 1396(d)(p)(3)(A)(ii) for individuals described in subsection 2 of this section,
11 but for the fact that their income exceeds the income level established by the state under 42 U.S.C.
12 Section 1396(d)(p)(2) but is less than one hundred and ten percent beginning January 1, 1993, and
13 less than one hundred and twenty percent beginning January 1, 1995, of the official poverty line for
14 a family of the size involved.

15 5. For an individual eligible for MO HealthNet under Title XIX of the Social Security Act,
16 MO HealthNet shall include payment of enrollee premiums in a group health plan and all
17 deductibles, coinsurance and other cost-sharing for items and services otherwise covered under the
18 state Title XIX plan under Section 1906 of the federal Social Security Act and regulations
19 established under the authority of Section 1906, as may be amended. Enrollment in a group health
20 plan must be cost effective, as established by the Secretary of Health and Human Services, before
21 enrollment in the group health plan is required. If all members of a family are not eligible for MO
22 HealthNet and enrollment of the Title XIX eligible members in a group health plan is not possible
23 unless all family members are enrolled, all premiums for noneligible members shall be treated as
24 payment for MO HealthNet of eligible family members. Payment for noneligible family members
25 must be cost effective, taking into account payment of all such premiums. Non-Title XIX eligible
26 family members shall pay all deductible, coinsurance and other cost-sharing obligations. Each
27 individual as a condition of eligibility for MO HealthNet benefits shall apply for enrollment in the
28 group health plan.

29 6. Any Social Security cost-of-living increase at the beginning of any year shall be
30 disregarded until the federal poverty level for such year is implemented.

31 7. If a MO HealthNet participant has paid the requested spenddown in cash for any month
32 and subsequently pays an out-of-pocket valid medical expense for such month, such expense shall
33 be allowed as a deduction to future required spenddown for up to three months from the date of such
34 expense."; and"; and
35

36 Further amend said bill by amending the title, enacting clause, and intersectional references
37 accordingly.
38

39 THIS AMENDS 0506H04.17H